

FEE TRANSMITTAL**Complete if Known**

| | | | | | |
|--|--|----------------------|------------------------|---------------------|---------|
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Application Number | 10/590,493-Conf. #1082 | | |
| | | Filing Date | June 8, 2007 | | |
| | | First Named Inventor | Takahide Kohro | | |
| | | Examiner Name | C. D. Ricci | | |
| | | Art Unit | 1628 | | |
| TOTAL AMOUNT OF PAYMENT | | (\$) | 150.00 | Attorney Docket No. | 032218A |

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☐ Deposit Account Deposit Account Number: 50-2866 Deposit Account Name: Westerman, Hattori, Daniels & Adrian, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 380 | 190 | 620 | 310 | 250 | 125 | |
| Design | 250 | 125 | 120 | 60 | 160 | 80 | |
| Plant | 250 | 125 | 380 | 190 | 200 | 100 | |
| Reissue | 380 | 190 | 620 | 310 | 750 | 375 | |
| Provisional | 250 | 125 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| Fee Description | Fee (\$) | Small Entity Fee (\$) |
|--|----------|-----------------------|
| Each claim over 20 (including Reissues) | 60 | 30 |
| Each independent claim over 3 (including Reissues) | 250 | 125 |
| Multiple dependent claims | 450 | 225 |

| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|----------|---------------|
| 4 | - or HP = | x | = |

HP = highest number of total claims paid for, if greater than 20.

| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
|---------------|--------------|----------|---------------|
| 2 | - or HP = | x | = |

HP = highest number of independent claims paid for, if greater than 3.

| Multiple Dependent Claims | Fee (\$) | Fee Paid (\$) |
|---------------------------|----------|---------------|
| | | |

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$310 (\$155 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|--------------------------------|---------------|
| | - 100 = | /50 = | (round up to a whole number) x | = |

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1251 Extension for response within first month 150.00

SUBMITTED BY

| | | | | |
|-------------------|-----------------------------------|--------|-----------|----------------|
| Signature | Registration No. (Attorney/Agent) | 56,527 | Telephone | (202) 822-1100 |
| Name (Print/Type) | Ryan B. Chirnomas | | Date | March 22, 2012 |